



CITY OF KIRKLAND

YOUTH APPLICATION: *Transportation Commission*

Please print or type:

Name _____

Date _____

Address _____

Phone - Home _____

Phone – Cell _____

Length of residence in Kirkland _____

E-mail _____

School Attending _____

Grade Level _____ Age _____

List Committees, Clubs, & Organizations you participate in or belong to (both in school and outside of school): _____

Describe any work/job experiences: _____

Describe any volunteer activities you have had or are currently involved with: _____

Please note any particular experience with transportation issues: _____

Why are you seeking a position on this Commission? _____

(As the City Council will choose the candidates and conduct interviews from the applicant pool, please do not use City Council members as personal references.)

Signature

This position is open until filled